

# CLAIMS ONLY

SERIAL NO.	FILING DATE
APPLICANT(S)	

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4	1					
5	1					
6		1				
7		1				
8		1				
9	1					
10		1				
11		1				
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48						
49						
50						
TOTAL IND.	6					
TOTAL DEP.	9					
TOTAL CLAIMS	15					

	*	IND.	DEP.	*	IND.	DEP.	*	IND.	DEP.
	IND.			DEP.			IND.		
51									
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99									
100									
TOTAL IND.									
TOTAL DEP.									
TOTAL CLAIMS									

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS